(iv) Prophylaxis Schemes against nutritional Anaemia among mothers and children and Prophylaxis against blindness among children due to Vitamin 'A' deficiency.

**Malaria Cases in Delhi**

2033. SHRI DHULESHWAR MEENA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that cerebral malaria is spreading in the Capital;

(b) if so, the number of cases of malaria reported in 1991 and the deaths due to it;

(c) the genesis of this type of malaria;

(d) the steps taken to counter the disease; and

(e) the medicines suggested generally for use by the persons afflicted by this disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) and (b) As per the reports received from Union Territory of Delhi, 8491 malaria cases including 24 cases of P. falciparum have been reported during 1991. Only one death has been reported due to malaria from a private hospital.

(c) Cerebral malaria is the most common complication of P. falciparum infection and is characterised by high density of parasite in the blood. It generally affects the lower age group population and pregnant females due to lack/depressed body resistance to the infections. The development of cerebral malaria or complications of P. falciparum is generally due to (i) misdiagnosis, (ii) delayed treatment, and (iii) inadequate treatment in terms of drug resistance, dosage and supportive care.

(d) The specific steps to control and contain malaria including P. falciparum include:

(1) Detection and treatment of malaria cases at dispensaries, malaria clinics and hospitals.

(2) Weekly application of chemicals such as malaria larvicide oil (MLO) in mosquito breeding places to destroy mosquito larvae.

(3) Bio-environmental methods such as elimination of mosquito breeding places, introduction larvivorous fish, wherever feasible.

(4) Health education to create public awareness for active participation in anti malarial measures.

(e) Chloroquine is the drug of choice for treatment of all malaria cases but when patients develops cerebral malaria, the drug of choice is quinine.

**Licences for manufacture- of Vaccine**

2034. SHRIMATI KAMLA SINHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to curtail powers of State Government to issue licences for manufacturing vaccines and certain products;

(b) if so, what are the reasons therefor; and

(c) what is the reaction of the State Governments in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) to (c) In order to regulate issue of licences for manufacture of certain sensitive items like vaccines, blood and blood products and I.V. fluids, the Central Government propose to acquire enabling powers by suitable amendments to Drug and Cosmetic Rules, 1945. This proposal was included in one of the agenda items for the Conference of Health Minister's on 6th and 7th Jan., 1992 but no State Govt, expressed any reservation on the issue.

**Legislation on Tobacco Consumption**

2035. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have decided to bring forward a comprehensive legislation on tabacco-consumption in all forms;